

SPECIAL EVENT - PUBLIC PROPERTY USER APPLICATION & AGREEMENT

DIRECTIONS

Step One:





• If this request involves renting the Big Four Depot - Community Room Contact Lafayette Parks Department for availability / 765-807-1500

Step Two:

• Complete and submit this application to Lafayette Engineering Department City Hall, 2nd floor, 20 N 6th Street, Lafayette, IN / 765-807-1050

| <u>User Information</u> | | | | | |
|--|--|--|--|--|--|
| Date of Function: May 3, 2020 Time: From: 6:00 am/m to: 7:00 am/m | | | | | |
| Name: Fr. Tim Alkire Organization: St. Boniface Church | | | | | |
| Street Address: 318 N 9th Street | | | | | |
| City: Lafry ette State: IN Zip Code: 47904 | | | | | |
| Contact person(s): Marcia (tretencord Phone Number(s): 765-742-5063 | | | | | |
| Email: bonio ffice a comcastonet | | | | | |
| Event Description: <u>Eucharistic Procession</u> | | | | | |
| Caterer: Caterer's Phone Number: | | | | | |
| This event will utilize the following venues (check all that apply): | | | | | |
| Big 4 Depot - Community Room Riehle Plaza John T. Myers Bridge | | | | | |
| City Right-of-way City Street Sidewalk Other | | | | | |
| This event will include the following elements (check all that apply): | | | | | |
| Anticipated Attendance: | | | | | |
| Street/Sidewalk/Right-of-way restriction or closure Food or Beverages | | | | | |
| Restroom Facilities (required for events 4+ hours) Tents/Canopies | | | | | |
| Alcohol (security is required) Security (required when serving alcohol) | | | | | |
| Not sure if you need an A&E Permit? Go to: | | | | | |
| Amusement & Entertainment Permit # http://www.in.gov/dhs/2795.htm | | | | | |
| Stage Urireworks Outdoor cooker/grill Other | | | | | |

Optional Equipment & Services:

Γraffic Control: barricades, *No Parking* signs,

Timetable (Minimum # of days. Advanced planning is encouraged; sequence remains the same)

\$25

| C | 7 days 14 days 21 d | | | days 42 (| | | days |
|-------|---------------------|---|---|---|----------|----------|---------------------|
| | Pre-planning | | Notices | Event Preparation | | Event | |
| Begin | 1st week | 2nd week | 3rd week | 4th week | 5th week | 6th week | |
| | First contact | Submit Application Pre-event Meeting | Contact Neighbors prior to Board of Works Hearing | Board of Works Public Hearing & Approval | | | Date of Event |

| Appli | cation submittal checklis | <u>t</u> | | | | | |
|---------------|---|--------------|------------------------------------|--|--|--|--|
| $ \sqrt{} $ | Application | | | | | | |
| | Pre-event meeting (if required) | | | | | | |
| | Good Neighbor letter to neighboring properties (send out prior to Board of Works hearing) | | | | | | |
| | Letter of request to Board of Works (omit if only using Big Four Depot community room) | | | | | | |
| | Receipt – payment made to City of Lafayette or Lafayette Parks Department | | | | | | |
| | Damage Deposit: | \$ | (required only when renting Depot) | | | | |
| | Permit Fee: | <u>\$ 25</u> | (fee waived when renting Depot) | | | | |
| | Rental Fee: | \$ | | | | | |
| | Equipment & Services: | \$ | (optional) | | | | |
| $ \sqrt{} $ | Certificate of Insurance | | | | | | |
| | Amusement & Entertainment Permit # | | | | | | |
| | Not sure if you need an A&E Permit? Want more information? Go to: http://www.in.gov/dhs/2795.htm and see definition of A&E Permit in Rule and Regulations instructions found at the same link as the Special Event Application | | | | | | |
| | Traffic Control / Public Safety / Emergency Plan | | | | | | |
| \square | User Agreement | | | | | | |
| | Board of Public Works and Safety meeting (if required) | | | | | | |

USER AGREEMENT:

INDEMNIFICATION AND RELEASE. In consideration of being permitted the use of the venue(s) indicated above on this document (the "Property"), which Property is owned by the City of Lafayette, User as indicated below, for User and User's legal representatives, successors, and assigns, hereby releases waives and discharges the City of Lafayette, it officers, departments and employees and of them (herein collectively, "City") from all liability to User and User's officers, members, legal representatives, successors, invitees and assigns (herein collectively "User") from any and all loss or damage, and any claim of damages resulting therefore, on account of injury to persons or property arising out of possession or use of the Property, whether caused by the negligence of City, or any of them, or otherwise, resulting during the time the User is entitled to occupy and use the Property. User shall exercise the privileges under this Agreement at User's own risk, and irrespective of any negligence of City, User shall indemnify and hold City harmless from any and all liability for all damages, costs, losses and expenses resulting from, arising out of, or in any way connected with User's use and possession of the Property, including attorney fees incurred by City in defending any action arising out of User's possession or use of the Property, whether caused by negligence of the City, or any of them, or otherwise. City shall not be liable to User for any reason whatever User's occupation or use of the Property shall be hindered or disturbed. User agrees that User has made inspection of the Property and is not relying upon any representations of City or any of them as to the condition of state of repair of the Property or to its suitability for any particular purpose. This release, waiver, and indemnification is intended to be as broad and inclusive as permitted by the laws of the State of Indiana, and if any portion thereof is held invalid, the balance shall, notwithstanding, continue in full legal force and effect.

I have read the above Indemnification and Release and the Policy and Rules governing the use of any public property, city street, sidewalk or public property within the city's right-of-way, the James F. Riehle Plaza, Big Four Community Room, and John T. Myers Main Street Pedestrian Bridge. I agree on my own behalf, and on behalf of the group or organization I am authorized to represent, to such Indemnification and Release and to follow such Rules and Regulations which are incorporated and made a part of this user agreement.

| "Lafayette Board of Works" | "User" |
|----------------------------|-------------------------------------|
| Ву: | "User" By: 21. July lkire Signature |
| | Printed: Fr. Tim Alkire |
| | Date: 2-/7-20 |



A Refuge For Eucharistic Hope, Healing, and Devotion



February 24, 2020

Chief Patrick Flannelly Lafayette Police Department 20 North 6th Street Lafayette, IN 47901

Dear Chief Flannelly:

On Sunday, May 3, 2020 we will be having our annual May Crowning procession in the streets surrounding the campus of St. Boniface.

We will have men in orange vests stopping traffic at the various intersections, as in the past. The procession will start around 6:15pm and end up back in the church around 6:40pm. We will process south on North 9th Street, turn right onto Ferry Street, then right onto 8th Street, right onto North Street and then a brief stint onto North 9th Street again to re-enter the church.

Thank you for your consideration and please contact me if you have any questions or concerns.

Sincerely,

Fr. Tim Alkire

Pastor

| Certificate of Coverage Date: 2/18/2020 | | | | | | | | |
|---|----------------------|--------------------|--|---|---------------------------|-----------------------------------|-----------|--|
| Certificate Holder The Roman Catholic Diocese of Lafayette-In-Indiana, Inc., Chancery Office P O Box 260 | | | Inc., | This Certificate is issued as a matter of information only and confers no rights upon the holder of this certificate. This certificate does not amend, extend or alter the coverage afforded below. | | | | |
| Lafayette, IN 47902 Covered Location | | | | Company Affording Coverage THE CATHOLIC MUTUAL RELIEF SOCIETY OF AMERICA 10843 OLD MILL RD | | | | |
| St. Boniface Church 318 N. 9th Street Lafayette, IN 47904 | | | | OMAHA, NE 68154 | | | | |
| Cover | ages | | | | | | | |
| This is to certify that the coverages listed below have been issued to the certificate holder named above for the certificate indicated, notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the coverage afforded described herein is subject to all the terms, exclusions and conditions of such coverage. Limits shown may have been reduced by paid claims. | | | | | | | | |
| | Type of Coverage | Certificate Number | | ge Effective Date | Coverage Expiration Date | Limits | | |
| | Property | | | | | Real & Personal Property | | |
| | | | | | | | | |
| | D. General Liability | | | | | Each Occurrence | 1,000,000 | |
| | X Occurrence | | | | | General Aggregate | | |
| | - Securiones | 8510 | 6/1/2019 | 9 | 6/1/2020 | Products-Comp/OP Agg | | |
| | Claims Made | | | | | Personal & Adv Injury | | |
| | | | | | | Fire Damage (Any one fire) | - | |
| | Excess Liability | | | | | Med Exp (Any one person) | | |
| | Excess Liability | | | | | Each Occurrence | | |
| | Other | | | | | Annual Aggregate Each Occurrence | | |
| | Other | | | | | | | |
| | | | | | | Claims Made | | |
| | | | | | | Annual Aggregate Limit/Coverage | | |
| | | | | | | Limit/Coverage | | |
| | | | | | | | | |
| Description of Operations/Locations/Vehicles/Special Items (the following language supersedes any other language in this endorsement or the Certificate in conflict with this language) Coverage verified for claims arising out of the negligence of St. Boniface Church's Eucharistic Procession on May 3, 2020 from 6:00 p.m. to 7:00 p.m. | | | | | | | | |
| Holder of Certificate Cancellation | | | | | | | | |
| City of Lafayette, IN Lafayette Board of Works 20 N 6th Street Lafayette, IN 47904 | | | Should any of the above described coverages be cancelled before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the holder of certificate named to the left, but failure to mail such notice shall impose no obligation or liability of any kind upon the company, its agents or representatives. | | | | | |
| 0175002542 | | | | Authoriz | Authorized Representative | | | |

MISCELLANEOUS PAYMENT RECPT#: 2057133 City of Lafayette, IN 20 N 6th St Lafayette IN 47901

DATE: 03/02/20

TIME: 12:34

CLERK: sscott

DEPT:

CUSTOMER#: 999

MISC CUSTOMER

COMMENT: EUCHARISTIC PROCESSI

CHARGES:

apg1 APPLICATION FEE

25.00

AMOUNT PAID:

25.00

PAID BY:

ST. BONIFACE

PAYMENT METH: CHECK

008091

REFERENCE:

AMT TENDERED:

25,00

AMT APPLIED:

25.00

CHANGE:

.00